

01/09/02

01-14-02

PATENT APPLICATION

Variable	Mean	SD	Min	Max
Age	35.2	12.5	18	65
Gender	Male	Female		
Marital status	Married	Single		
Education	High school	College		
Occupation	Manager	Worker		
Income	\$30,000	\$40,000	\$10,000	\$60,000
Health status	Good	Fair	Poor	
Exercise frequency	Weekly	Monthly	Never	
Stress level	Low	Medium	High	
Sleep quality	Good	Fair	Poor	
Dietary habits	Healthy	Unhealthy		
Alcohol consumption	None	Occasional	Frequent	
Smoking status	Non-smoker	Smoker		
Family size	2	3	1	4
Home ownership	Owner	Renter		
Commute time	30 min	45 min	15 min	60 min
Work-life balance	Good	Fair	Poor	
Job satisfaction	High	Medium	Low	
Health insurance	Yes	No		
Access to healthcare	Easy	Difficult		
Healthcare costs	\$500	\$1,000	\$200	\$2,000
Healthcare quality	Good	Fair	Poor	
Healthcare access	Good	Fair	Poor	
Healthcare utilization	High	Medium	Low	
Healthcare satisfaction	High	Medium	Low	
Healthcare accessibility	Good	Fair	Poor	
Healthcare affordability	Good	Fair	Poor	
Healthcare quality of care	Good	Fair	Poor	
Healthcare patient experience	Good	Fair	Poor	
Healthcare provider communication	Good	Fair	Poor	
Healthcare provider empathy	Good	Fair	Poor	
Healthcare provider knowledge	Good	Fair	Poor	
Healthcare provider skills	Good	Fair	Poor	
Healthcare provider attitude	Good	Fair	Poor	
Healthcare provider professionalism	Good	Fair	Poor	
Healthcare provider respectfulness	Good	Fair	Poor	
Healthcare provider honesty	Good	Fair	Poor	
Healthcare provider integrity	Good	Fair	Poor	
Healthcare provider reliability	Good	Fair	Poor	
Healthcare provider accountability	Good	Fair	Poor	
Healthcare provider transparency	Good	Fair	Poor	
Healthcare provider communication skills	Good	Fair	Poor	
Healthcare provider empathy skills	Good	Fair	Poor	
Healthcare provider knowledge skills	Good	Fair	Poor	
Healthcare provider skills skills	Good	Fair	Poor	
Healthcare provider attitude skills	Good	Fair	Poor	
Healthcare provider professionalism skills	Good	Fair	Poor	
Healthcare provider respectfulness skills	Good	Fair	Poor	
Healthcare provider honesty skills	Good	Fair	Poor	
Healthcare provider integrity skills	Good	Fair	Poor	
Healthcare provider reliability skills	Good	Fair	Poor	
Healthcare provider accountability skills	Good	Fair	Poor	
Healthcare provider transparency skills	Good	Fair	Poor	
Healthcare provider communication skills	Good	Fair	Poor	
Healthcare provider empathy skills	Good	Fair	Poor	
Healthcare provider knowledge skills	Good	Fair	Poor	
Healthcare provider skills skills	Good	Fair	Poor	
Healthcare provider attitude skills	Good	Fair	Poor	
Healthcare provider professionalism skills	Good	Fair	Poor	
Healthcare provider respectfulness skills	Good	Fair	Poor	
Healthcare provider honesty skills	Good	Fair	Poor	
Healthcare provider integrity skills	Good	Fair	Poor	
Healthcare provider reliability skills	Good	Fair	Poor	
Healthcare provider accountability skills	Good	Fair	Poor	
Healthcare provider transparency skills	Good	Fair	Poor	
Healthcare provider communication skills	Good	Fair	Poor	
Healthcare provider empathy skills	Good	Fair	Poor	
Healthcare provider knowledge skills	Good	Fair	Poor	
Healthcare provider skills skills	Good	Fair	Poor	
Healthcare provider attitude skills	Good	Fair	Poor	
Healthcare provider professionalism skills	Good	Fair	Poor	
Healthcare provider respectfulness skills	Good	Fair	Poor	
Healthcare provider honesty skills	Good	Fair	Poor	
Healthcare provider integrity skills	Good	Fair	Poor	
Healthcare provider reliability skills	Good	Fair	Poor	
Healthcare provider accountability skills	Good	Fair	Poor	
Healthcare provider transparency skills	Good	Fair	Poor	
Healthcare provider communication skills	Good	Fair	Poor	
Healthcare provider empathy skills	Good	Fair	Poor	
Healthcare provider knowledge skills	Good	Fair	Poor	
Healthcare provider skills skills	Good	Fair	Poor	
Healthcare provider attitude skills	Good	Fair	Poor	
Healthcare provider professionalism skills	Good	Fair	Poor	
Healthcare provider respectfulness skills	Good	Fair	Poor	
Healthcare provider honesty skills	Good	Fair	Poor	
Healthcare provider integrity skills	Good	Fair	Poor	
Healthcare provider reliability skills	Good	Fair	Poor	
Healthcare provider accountability skills	Good	Fair	Poor	
Healthcare provider transparency skills	Good	Fair	Poor	
Healthcare provider communication skills	Good	Fair	Poor	
Healthcare provider empathy skills	Good	Fair	Poor	
Healthcare provider knowledge skills	Good	Fair	Poor	
Healthcare provider skills skills	Good			

My residence, post office address and citizenship are as stated below next to my name,

_____ is attached hereto
was filed on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Sec. 1.56(a)

I hereby claim foreign priority benefits under Title 35, United States Code, Sec. 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Number	Country	Day/Month/Year Filed	Yes	No
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I hereby claim priority benefits under Title 35, United States Code Sec. 119(e) of the below listed United States provisional application(s):

60/260,745 January 9, 2001

Appln Serial No.	Filing Date
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I hereby claim the benefit under Title 35, United States Code, Sec. 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Sec. 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Sec. 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

Appln. Serial No.	Filing Date	Status (patented, pending, abandoned)
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SHERMAN & SHERMAN

ATTORNEYS AT LAW
DOCKET NO. MET1.0002

PATENT APPLICATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I/(We) hereby appoint the following attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: KENNETH L. SHERMAN, Registration No. 33,783 of:

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with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and all future telephone calls and correspondence should be directed and/or addressed to Kenneth L. Sherman, Sherman & Sherman

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CERTIFICATE OF MAILING BY "EXPRESS MAIL"

I hereby certify that this paper of fee is being deposited with the United States Postal Service on this date: 1/9/02, in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number 2550624359615 addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231

Evelyn Menjivar
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